

December 7, 2018

Marlene H. Dortch Office of the Secretary Federal Communications Commission 445 12th St. SW Washington, DC 20554

RE: WC Docket No. 18-336 and CC Docket No. 92-105; National Suicide Hotline Improvement Act of 2018

Dear Madam Secretary,

Crisis Response Network appreciates the opportunity to respond in support of establishing a three-digit designation for the National Suicide Prevention Lifeline (NSPL).

As one of the largest crisis hotlines in the United States, a participant in the National Suicide Prevention Lifeline network and operator of Arizona 2-1-1, Crisis Response Network is uniquely positioned to respond to this inquiry.

It is generally agreed in the community that retirement of the current 10-digit NSPL number in support of a 3-digit option is warranted. The 10-digit number is difficult to remember, especially when someone is in a state of crisis.

There are two options that seem to dominate conversation related to this topic:

- Adopt a dedicated N11 designation; or
- Partner with the 211 network to collaboratively meet the needs of individuals experiencing a crisis event

With proper resources and funding either option *could* be successful. The ease and simplicity of offering a dedicated N11 designation would continue the current specialization and expertise related to addressing behavioral health and suicide-related crises, but also creates separation of crisis calls from often needed health and human services that 2-1-1 can connect people to. Utilizing the existing 211 system creates opportunities for a more robust offering of services, but a reduction in specialization and delays in adequate crisis intervention.

We believe that to successfully address the urgent need to tackle suicide in the United States warrants a dedicated N11 designation for the National Suicide Prevention Lifeline. In addition, NSPL and its network of providers should work more collaboratively with United Way Worldwide and local 211 operations to reduce barriers to vital health and human services, ensuring warm hand offs, data sharing and a greater pursuance of addressing social determinants of health.

It should be noted that both the National Suicide Prevention Lifeline and 211 networks are significantly under-resourced with many participating call centers operate these programs at a loss. A national strategy for sustainability of these vital programs should also be taken into consideration.

Thank you for the opportunity to respond.

Sincerely,

Justin N. Chase, LMSW, CPHQ, FACHE

with M. Chave

President/CEO

Crisis Response Network & Arizona 2-1-1